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Kuttam (Psoriasis) in Siddha Medicine: A Comprehensive Review

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ABSTRACT

Background: The Siddha system of medicine, an ancient Indian healing tradition, attributes diseases to imbalances in the three humors (Vatham, Pitham, Kapham). Psoriasis, termed *Kalanjagapadai* in Siddha, is classified among 18 types of *Kuttam* (skin diseases) and closely resembles modern descriptions of psoriasis, including its systemic and arthritic manifestations.

Objective: This study explores Siddha classifications, etiology, and clinical features of *Kalanjagapadai*, correlating them with contemporary dermatological understanding of psoriasis.

Methods: A systematic review of classical Siddha texts (*Yugi Vaithiya Chinthamani*, *Agathiyar Gunavagadam*) and modern literature (PubMed, Google Scholar) was conducted. Data on etiology, classifications, and treatments were analyzed, with cross-referencing between traditional and biomedical perspectives.

Results: Siddha texts classify *Kuttam* into 18 subtypes, with psoriasis linked to *Vatham* imbalance. Etiological factors include genetic predisposition, infections (e.g., streptococcal), stress, and karmic influences. Clinical features mirror modern psoriasis: erythematous plaques with silvery scales (Auspitz sign), nail pitting, and psoriatic arthritis (*Kalanjaga Vaatham*). Treatment emphasizes humoral balance through herbal formulations, detoxification, and lifestyle modifications.

Conclusion: Siddha medicine provides a holistic framework for psoriasis, integrating physical, emotional, and karmic dimensions. Its detailed classifications and multimodal therapies align with modern concepts of psoriasis as a systemic, immune-mediated condition. Validating Siddha protocols through rigorous research could bridge traditional and contemporary dermatology, offering complementary management strategies.

Keywords: Siddha medicine, *Kalanjagapadai*, psoriasis, *Kuttam*, humoral imbalance, traditional medicine.

INTRODUCTION:

The Siddha system of medicine, one of the oldest traditional healing systems in the world, is deeply rooted in the principles of Thathuvam (96 fundamental elements) and the intricate constitution of the human body. According to Siddha philosophy, the human body is composed of 10 vital airs (Vayus), 10 main arteries, 72,000 blood vessels, and 13,000 nerves, all of which play a crucial role in maintaining physiological balance. A key diagnostic and therapeutic principle in Siddha medicine revolves around the concept of Mukkutram (three humors—Vatham, Pitham, and Kapham). The derangement (imbalance) of these humors is considered the primary cause of diseases, and their restoration is essential for effective treatment.

Diseases in the Siddha system are classified into 4,448 types, reflecting its comprehensive approach to pathology. Among these, skin diseases are a common health concern, affecting approximately 10%–20% of patients seeking medical care. The skin, being the protective outer covering of the body, is susceptible to various disorders due to internal imbalances and external factors. In Siddha medicine, skin diseases (*Kuttam*) are categorized into 18 distinct types, as documented by revered Siddhars such as Yugimuni, Agasthiyar, and Dhanvanthri in classical Siddha texts like *Yugi Vaithiya Chinthamani*, *Agathiyar Gunavagadam*, and *Theraiyar Yamaga Venba*.

Psoriasis, a chronic immune-mediated inflammatory disease, is characterized by erythematous (red), silvery scaly plaques with pinpoint bleeding (Auspitz sign) commonly affecting the skin, scalp, nails, and joints, with potential systemic involvement. It can occur at any age, and its global prevalence ranges between 2%–4%, making it a significant dermatological condition.

In Siddha medicine, psoriasis is referred to as "*Kalanjagapadai*." Interestingly, Siddhar Yugi did not classify it as an independent disease but rather described it under Vatha disorders as "*Kalanjagavatham*." The clinical manifestations of *Kalanjagapadai* closely resemble those of psoriasis as defined in modern dermatology, indicating the Siddhars' advanced understanding of the disease centuries ago.

Objectives

This article aims to provide a detailed and descriptive analysis of *Kalanjagapadai* (psoriasis) by exploring different Siddha school of thoughts from classical texts. It will also discuss the 18 types of Kuttam (skin diseases) and correlate them with *Kalanjagapadai* and its modern counterpart (psoriasis), offering a comprehensive perspective on its etiology, clinical features, and Siddha-based management. By integrating traditional wisdom with contemporary medical knowledge, this study seeks to enhance the understanding of psoriasis from both Siddha and modern dermatological viewpoints.

MATERIALS AND METHODS:

Data Collection and study setting

The study was conducted through an extensive review of classical Siddha texts and modern medical literature. Primary Siddha references were obtained from the Library of Government Siddha Medical College, Palayamkottai, including authoritative texts such as Yugi Vaithiya Chinthamani, Agathiyar Gunavagam, Theraiyar Yamaga Venba, and Dhanvanthri Vaithiyam. Electronic databases including PubMed, Google Scholar, ResearchGate, and TNMGRMU electronic repository were systematically searched using keywords like "Kuttam," "Kalanjagapadai," "Psoriasis," and "immune-mediated skin disorders" to gather contemporary medical perspectives. Both traditional and modern sources were carefully evaluated to ensure comprehensive coverage of the subject matter.

Data Analysis

The collected data were methodically organized and analyzed across several key parameters. The study examined etiological factors (including humoral imbalances and environmental triggers), clinical manifestations (comparing Siddha descriptions with modern dermatological findings), and disease classifications (correlating the 18 types of Kuttam with subtypes of Psoriasis). Special attention was given to treatment methodologies documented in Siddha literature, such as herbal formulations and detoxification therapies. To ensure accuracy, the findings were cross-referenced with multiple Siddha texts and validated.

Ethical Considerations

The research adhered to strict ethical guidelines to maintain academic integrity. All references were properly cited to avoid plagiarism, and only peer-reviewed journal articles and authenticated Siddha manuscripts were included in the analysis. The study prioritized evidence-based interpretations while respecting traditional knowledge systems, ensuring a balanced integration of Siddha medicine and modern dermatological science. This rigorous approach facilitated a comprehensive understanding of *Kalanjagapadai* (Psoriasis) from both historical and contemporary medical perspectives.

Classification Of Kuttam:

The Siddha system classifies skin diseases (Kuttam) through various approaches documented by different Siddhars in classical texts. Below is a comprehensive tabulation of these classifications from four major Siddha literatures:

Table. 1 Literature differentiation of Kuttam in various text.

| Yugi Vaidhiya Chinthamani (18 Types) | Anubava Vaithiya Deva Ragasiyam (18 Types) | Athma Rathcha Mirtham (4 Types) | T.V. Samba Sivam Pillai (18 Types) |
|--------------------------------------|--|---------------------------------|------------------------------------|
| 1. Pundaregam (Padarthamarai) | 1. Vatham: Kabala kuttam | 1. Ven Kuttam | 1. Neer kuttam |
| 2. Virpodagam (Koppula perunoi) | 2. Pitham: Avuthumbara pitham | 2. Sen kuttam | 2. Ven kuttam |
| 3. Bamam (Sirangu perunoi) | 3. Kabam: Mandala kabham | 3. Karung kuttam | 3. Sori kuttam |
| 4. Gajasarumam (Yaana thol perunoi) | 4. Vatha Pitham: Rusiya Jimmiga Kuttam | 4. Peru viyathi | 4. Karung Kuttam |
| 5. Karnam (Kaadhu perunoi) | 5. Pitha Kabham: Saruma Kuttam | | 5. Perum Kuttam |

| Yugi Vaidhiya Chinthamani (18 Types) | Anubava Vaithiya Deva Ragasiyam (18 Types) | Athma Rathcha Mirtham (4 Types) | T.V. Samba Sivam Pillai (18 Types) |
|--|--|---------------------------------|------------------------------------|
| 6. Sikuram (Thol perunoi) | 6. Pitha Kabham: Yega Kuttam | | 6. Sen kuttam |
| 7. Krishnam (Karu perunoi) | 7. Pitha Kabham: Sithma Kuttam | | 7. Pori kuttam |
| 8. Avuthumbaram (Athikkai perunoi) | 8. Pitha Kabham: Kidiba kuttam | | 8. Vari kuttam |
| 9. Mandalam (Valaya perunoi) | 9. Pitha Kabham: Alasa kuttam | | 9. Eri kuttam |
| 10. Abarisam (Vali perunoi) | 10. Kabha Vatham: Vibathiga kuttam | | 10. Viral kurai kuttam |
| 11. Visarchigam (Sori perunoi) | 11. Thiritodam: Thatthuru kuttam | | 11. Sadai kuttam |
| 12. Vibathigam (Sengkuttam) | 12. Thiritodam: Pundareega kuttam | | 12. Yaanai kuttam |
| 13. Sarmathalam (Thol Vedippu perunoi) | 13. Thiritodam: Sathuru kuttam | | 13. Thimir kuttam |
| 14. Kideebam (Pandrihol) | 14. Thiritodam: Virpodaga kuttam | | 14. Viranai kuttam |
| | 15. Thiritodam: Bama kuttam | | 15. Kaai kuttam |
| | 16. Thiritodam: Sarmathala kuttam | | 16. Suli kuttam |
| | 17. Vischarchiga kabham | | 17. Kirumi Kuttam |
| | 18. Mandala kabham | | 18. Aara Kuttam |

In Siddha literature, skin diseases (Kuttam) are classified based on their curability and manifestation patterns. Asathiyam refers to incurable forms of skin lesions, while Sathiyam denotes curable forms. According to Thanvanthiri Vaithiyam, skin diseases are categorized into 18 types, with 7 falling under Asathiyam (incurable) and 11 under Sathiyam (curable).

On the other hand, Thirumoolar presents an alternative classification system, also comprising 18 types, but grouped based on disease progression and presentation. These include:

- Kiranthi Megathal Varupavai (8 types)
- Vandinaal Varupavai (6 types)
- Puluvaal Varupavai (4 types)

These classifications reflect the Siddha system's detailed approach to dermatological disorders, considering both prognosis (curable vs. incurable) and clinical patterns (manifestation-based groupings). This structured categorization aids in diagnosis, treatment planning, and prognosis assessment in traditional Siddha medicine.

Table. 2. Classification of Kuttam

| Classification of Kuttam | Thanvanthiri Vaithiyam (18 Types) | Thirumoolar (18 Types) |
|-----------------------------|-----------------------------------|------------------------|
| Asathiyam (Incurable form) | 7 types | - |
| Sathiyam (Curable form) | 11 types | - |
| Kiranthi Megathal Varupavai | - | 8 types |
| Vandinaal Varupavai | - | 6 types |
| Puluvaal Varupavai | - | 4 types |

Aetiology of Kuttam (Skin Diseases) in Siddha Medicine

The Siddha system of medicine provides a **comprehensive understanding** of the causes (aetiology) of **Kuttam (skin diseases)**, attributing them to a combination of **physical, environmental, psychological, and karmic factors**. Different Siddhars have described various causative factors based on their observations and clinical experiences.

1. Thirumoolar's Classification

Thirumoolar categorizes the causes of Kuttam into **three major groups**:

- **Six types** caused by **venereal origins** (sexually transmitted infections or impurities in reproductive health).
- **Eight types** caused by **insect bites** (microbial or parasitic infections).
- **Four types** caused by **worm infestations** (internal parasites affecting skin health).

2. Guru Naadi's Perspective

- Attributes skin diseases primarily to **microorganisms (pathogenic bacteria, viruses, or fungi)**.

3. Sirappu Maruthuvam (Special Medicine) – Psoriasis-Specific Aetiology

Psoriasis, known as **Kalanjagapadai** in Siddha, has multiple contributing factors:

- **Genetic predisposition** (hereditary factors).
- **Unknown aetiologies** (idiopathic cases).
- **Tonsillitis & respiratory infections** (linked to guttate psoriasis).
- **Allergic disorders** (food or environmental triggers).
- **Psychological disturbances** (stress, depression, anxiety).
- **Climatic factors** (humidity changes).
- **Beta-haemolytic streptococci** (triggering guttate psoriasis).
- **Drug-induced causes** (beta-blockers, chloroquine, polio vaccine).
- **Chemical exposure** (red oxide of copper).

4. Agathiyar's View

- **Kanman (karma or past deeds)** is considered the **root cause** of skin diseases.
- **Psychosocial factors** (negative emotions, sinful actions) contribute to skin ailments.

5. Yugimuni's Perspective

- Focuses **solely on psychosocial and moral causes**, including:
 - **Misbehaviour in sacred places** (temples).

- **Sacrilege towards God** (disrespect to deities).
- **Humiliating elders** (lack of reverence).
- **Breach of trust** (betrayal).
- **Exploitation of workers** (paying unfair wages).

6. Agathiyar Kanmakandam

- **Environmental and ethical violations** as causes:
 - **Plucking buds unnecessarily** (harming nature).
 - **Domestic violence** (physical/emotional abuse).
 - **Hurting parents** (disrespect to family).

7. Dhanvanthiri Vaithiya Rogam

- **Dietary and behavioural causes:**
 - **Intake of allergic/contaminated foods.**
 - **Excessive lustful thoughts.**
 - **Destiny (Kanma Vinai – karmic retribution).**
 - **Scolding elders (disrespect leading to disease).**

8. Manmurukiyam

- **Lifestyle and environmental triggers:**
 - **Sudden changes in place, work, or climate.**
 - **Toxins from animal bites or stings.**

9. Agathiyar Vaithiyam

- **Systemic and dietary influences:**
 - **Underlying diseases** (tuberculosis, diabetes, fever, diarrhoea).
 - **Excessive intake of allergenic foods** (sweets, fried items, chocolates, milk – particularly **beta-lactoglobulin in children**).
 - **Climatic changes** (weather-induced aggravation).

10. Parasasekaram

- **Psychological and habitual causes:**
 - **Kanmam (karmic burden).**
 - **Chronic stress and anxiety.**
 - **Excessive sleep (lifestyle imbalance).**

CLINICAL FEATURES OF KUTTAM (PSORIASIS/KALANJAGAPADAI) IN SIDDHA MEDICINE

1. General Presentation (Sirappu Maruthuvam - Dr. R. Thiyagarajan)

Psoriasis (Kalanjagapadai) manifests with distinct dermatological features:

- **Primary Lesions:**
 - Well-defined **erythematous (red) patches/macules** with **raised margins**
 - Characteristic **thick, rough, silvery-white scales** covering lesions
 - **Auspitz sign:** Pinpoint bleeding when scales are scraped off
- **Morphological Variations:**
 - Lesions vary from **small, thin plaques** to **large, thick hyperkeratotic patches**

- In pediatric cases (**guttate psoriasis**), lesions appear as **water-drop shaped papules**

2. Chronic Psoriasis Presentations

- **Distribution Patterns:**
 - **Flexural psoriasis:** Affects elbow/knee creases (flexor surfaces)
 - **Palmoplantar psoriasis:** Thick scaling on palms and soles
 - **Generalized psoriasis:** Widespread involvement with excessive scaling
 - **Nummular psoriasis:** Coin-shaped plaques
 - **Inverse psoriasis:** In obese patients, affects **umbilicus, inguinal folds, axillae** (poorly demarcated borders)
- **Nail Involvement:**
 - Present in **25% patients** (pitting, onycholysis, oil-drop discoloration)
- **Systemic Complication:**
 - **7% develop psoriatic arthritis** (Kalanjaga Vaatham)

3. Psoriatic Arthropathy (Kalanjaga Vaatham)

- **Joint Involvement:**
 - Primarily affects **distal interphalangeal joints (DIPs)**
 - Also impacts **fingers, ankles, knees, sacroiliac joints**
 - **Nail changes** often coexist (psoriatic onychopathy)
- **Radiological Progression:**
 - Early: **Osteoporosis** → **joint space narrowing**
 - Late: **Erosions** → **bone destruction** → **deformities (pencil-in-cup appearance)**
- **Siddha Correlation:**
 - Termed as "**Kalanjaga Vaatham**" - emphasizes Vatham dominance in chronic cases

4. Advanced Manifestations (Kannusamiin Jeevaraksha Mirutham)

- **Articular Destruction:**
 - **Erosive arthritis:** Targets fingers/toes → **cartilage/bone destruction**
 - Leads to **joint instability** and **ankylosis**
- **Systemic Symptoms:**
 - **Generalized pallor** (anemia of chronic disease)
 - **Erythematous papules** with sharp demarcation
 - **Constitutional symptoms:** Loss of taste, giddiness

Discussion

This research shows how ancient Siddha medicine accurately described psoriasis (Kuttam or Kalanjagapadai) long before modern science. The Siddha texts carefully observed and classified skin diseases, noting key features like red patches with white scales, bleeding when scratched, and different types in children and adults. What's remarkable is how Siddha medicine linked psoriasis not just to physical causes, but also to stress, diet, environment, and even past actions (karmam) - ideas that modern medicine is now beginning to understand.

The study found that Siddha doctors had identified psoriatic arthritis (joint pain with skin symptoms) and connected it to the same condition, just like doctors do today. Their treatments focused on balancing the body's energies (Vatham, Pitham, Kapham) with specific herbs and oils tailored to each patient's symptoms.

While these ancient treatments show promise, more scientific testing is needed to prove how well they work. This research helps connect traditional wisdom with modern medicine, offering new possibilities for treating psoriasis in a more complete way - not just the skin symptoms, but the whole person. Future studies should test Siddha remedies carefully to see which ones could help patients when used alongside today's treatments.

CONCLUSION:

Kuttam in Siddha medicine is not merely a skin condition, but a profound imbalance of the body's vital energies—Vatham, Pitham, and Kapham. The Siddha approach offers more than symptomatic relief; it seeks to restore harmony at the root level through personalized detoxification, herbal formulations, and lifestyle corrections. Unlike modern medicine, which often focuses on suppressing inflammation, Siddha addresses the whole person—physical, emotional, and even karmam influences—providing a truly holistic path to healing. The significance of Siddha care lies in its time-tested wisdom, offering sustainable relief without the long-term side effects of conventional treatments. By reviving these ancient protocols, we honor a medical tradition that has successfully managed psoriasis for centuries. Future research must validate these methods not as alternatives, but as complete systems of medicine capable of delivering comprehensive care. Siddha medicine doesn't just treat psoriasis—it transforms the body's inner terrain to prevent recurrence, making it an invaluable legacy for chronic skin disorders.

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